



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

Ohira et al.

Serial No.

09/771,733

Filed

: January 29, 2001

For

: METHOD FOR ENCODING/DECODING ERROR...

CERTIFICATE OF MAILING

Box No Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

I hereby certify that the attached Amendment, Amendment Transmittal, and Return Postcard along with any paper(s) referred to as being attached or enclosed and this Certificate of Mailing are being deposited with the United States Postal Service on the date shown below with sufficient postage as first-class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

> Respectfully submitted, SOFER & HAROUN, L.L.P.

By: <u>Slendui Ceiu</u> Sandria Cirillo Date: <u>//p/p5</u>

Mailing Address: SOFER & HAROUN, LLP 317 Madison Avenue, Suite 910 New York, New York 10017 Tel:(212)697-2800;fax (212)697-3004

Docket No. 807-007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

: Ohira et al.

Group Art Unit: 2133

Serial No.

: 09/771,733

Examiner: Fritz Alphonse

Filed

: January 29, 2001

For

: METHOD FOR ENCODING/DECODING ERROR CORRECTING CODE...

AMENDMENT FEE TRANSMITTAL

Box No Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

[X] No additional fee is required.

[] The additional fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining		Highest No. Covered by	_	_		
	After Amendment		Previous Payments	Present Extra	Rate		Additional Fee
Total Claims*	20	-	45	=0	x 9		\$.00
Independent Claims	1	-	6	=0	x \$		\$ <u>0</u>
Multiple (If claims added by amer Dependent Claim(s) Was no Multiple Dependent application before amend \$260.00 to additional feet			n(s) and there nt Claim(s) in ment add			Total:	\$ \$00
[] Verified Statement of "Small Entity" Status Under 37 CFR § 1.27 filed Reduced Fees Under 37 CFR § 1.9(f) (50% of total) paid herewith.						\$	

Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. § 1.75(c).

[]	Charge \$.00 fee to Deposit Account No. 19-2825 . Order No. 2 A DUPLICATE COPY OF THIS SHEET IS ATTACHED.					
[X]	The Commissioner is hereby authorized to charge any additional fees which may be required for this amendment, or credit any overpayment to Deposit Account No.19-2825. Order No. 807-007. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.					
[]	Page(s) of substitute Sequence Listing					
[]	Computer disk(s) containing substitute Sequence Listing					
[]	Statement under 37 C.F.R. § 1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.					
[]	A check in the amount of \$.00 to cover the filing fee is attached.					
		Respectfully submitted,				
		SOFER & HAROUN L.L.P.				
Dated:	1/17/25	By: Joseph Sofer Registration No. 34,438				
Mailing	Advan					

Mailing Address:

SOFER & HAROUN L.L.P. 317 Madison Avenue New York, New York 10017 (212) 697-2800 Fax: (212) 697-3004



Attorney Docket: 807-007

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TRANSMITTING APPARATUS AND NETWORK

Box No Fee

Commissioner for Patents Box 1450 Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION/ELECTION REQUIREMENT

Sir:

In response to the Office Action mailed December 22, 2004 in connection with the above-referenced application, please enter the following remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 16 of this paper.